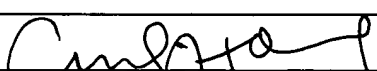



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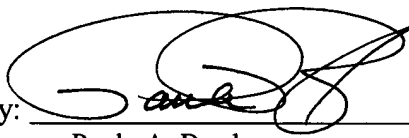
<p>STATUS INQUIRY</p> <p></p> <p>Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p>	Customer Number	24353
	Atty. Docket No.	AERX-067CON3
	Application Number	10/808,046
	Confirmation Number	4190
	Filing Date	March 23, 2004
	First Named Inventor	PATEL, RAJESH S.
	Examiner Name	To Be Assigned
	Group Art Unit	3752

Sir:

A **Utility Patent Application** was filed with the U.S. Patent and Trademark Office on **March 23, 2004** in the above-identified application. Since over **14-** months have passed and no Office Action has been received from the Patent and Trademark Office in response thereto, applicants respectfully request to be informed of the current status of the application.

Respectfully submitted,
BOZICEVIC, FIELD & FRANCIS LLP

Date: June 7, 2005

By: 
Paula A. Borden
Registration No. 42,344

BOZICEVIC, FIELD & FRANCIS LLP
1900 University Avenue, Suite 200
East Palo Alto, California 94303
Telephone: (650) 327-3400
Facsimile: (650) 327-3231

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Application Number	10/808,046
Filing Date	March 23, 2004
First Named Inventor	PATEL, RAJESH S.
Group Art Unit	3752
Examiner Name	To Be Assigned
Attorney Docket Number	AERX-067CON3

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Request for Corrected Filing Receipt (1 pg.) 2) Status Inquiry (1 pg.) 3) Marked-up Filing Receipt (2 pgs.) 4) ADS as filed on 03/32/04 (2 pgs.) 5) Return Postcard		
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Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signing Attorney/Agent (Reg. No.)	PAULA A. BORDEN, 42,344 BOZICEVIC, FIELD & FRANCIS, LLP
Signature	
Date	June 7, 2005

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